



**COMMONWEALTH OF VIRGINIA**  
 DEPARTMENT OF MINES, MINERALS AND ENERGY  
**DIVISION OF MINES**  
 PO DRAWER 900 • BIG STONE GAP, VIRGINIA 24219

## IMPOUNDMENT INSPECTION FORM

Company Name, Mine Name/No:			Name of Impoundment:		Date:	Mine Index
Address:			Location:			MSHA ID
City:	State:	ZIP:	County:	Office Phone Number:		Mine Phone :
Person with Overall Responsibility:			Facility I.D. Number:			Permit #:

<b>PHYSICAL CONDITIONS:</b>  Burning _____ Cracks/Scrapes on Crest _____ Sloughing/Building on Slope _____ Erosion Problems _____ Surface Movement _____ Sumps/Sinkholes in Slurry _____ Cracks/Building on Upstream Slope _____ Emergency Notification Plan _____  Embankment Freeboard _____ Feet Water Level _____	<b>SEEPAGE:</b>  Underdrain _____ Embankment Slope _____ Hillside _____ Downstream Foundation _____ Boils _____     
<b>CLOGGING:</b>  Pipes/Spillways _____ Decant System _____ Diversion Ditches _____ Trash Racks _____	<b>CRACKING/CRUSHING:</b>  Spillway Pipes _____ Decant Systems _____    

<b>CORRECTIVE ACTION(S) TAKEN:</b>
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<b>COMMENTS:</b>
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\_\_\_\_\_, Inspector / Specialist